



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 2329

Bib Data Sheet

SERIAL NUMBER 10/827,192	FILING DATE 04/16/2004 RULE	CLASS 706	GROUP ART UNIT 2121	ATTORNEY DOCKET NO. ILIFF.2DV3DVC
-----------------------------	---------------------------------------	--------------	------------------------	--------------------------------------

APPLICANTS

Edwin C. Iliff, La Jolla, CA;

**** CONTINUING DATA *******

This application is a CON of 09/588,881 06/06/2000 PAT 6,725,209
 which is a DIV of 09/088,940 06/02/1998 PAT 6,071,236
 which is a DIV of 08/176,041 12/29/1993 PAT 5,660,176

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 06/28/2004

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 40	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature	Initials		

ADDRESS

20995
 KNOBBE MARTENS OLSON & BEAR LLP
 2040 MAIN STREET
 FOURTEENTH FLOOR
 IRVINE, CA
 92614

TITLE

Computerized medical diagnostic and treatment advice system and method including mental status examination

FILING FEE RECEIVED 717	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---